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| APPLICATION NUMBER | FILING OR 371 (c) DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|------------------------|-----------------------|------------------------|
| 10/711,583 | 09/27/2004 | Michael BURR | CXT-093 |

00959

LAHIVE & COCKFIELD, LLP.
28 STATE STREET
BOSTON, MA 02109

CONFIRMATION NO. 5582

FORMALITIES LETTER



OC000000014146556

Date Mailed: 10/20/2004

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

03/22/2005 TBESHAH1 00000062 120080 10711583

FILED UNDER 37 CFR 1.53(b)

01 FC:1051 130.00 DA

Filing Date Granted

Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

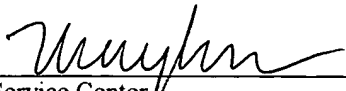
SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is **\$130** for a Large Entity

- **\$130** Late oath or declaration Surcharge.

Replies should be mailed to: Mail Stop Missing Parts
Commissioner for Patents
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Alexandria VA 22313-1450

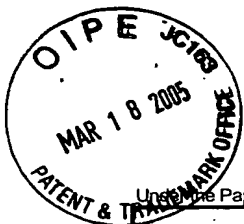
*A copy of this notice **MUST** be returned with the reply.*

A handwritten signature in cursive script, appearing to read 'M. Mayhew', is written over a horizontal line.

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | |
|---|------------------------|-----------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/711583-Conf. #5582 |
| | Filing Date | September 27, 2004 |
| | First Named Inventor | Michael BURR |
| | Art Unit | 2157 |
| | Examiner Name | Not Yet Assigned |
| Total Number of Pages in This Submission | Attorney Docket Number | CXT-093 |

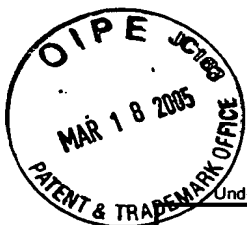
| ENCLOSURES (Check all that apply) | | |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Combined Declaration and Power of Attorney Part 2 Copy of Notice Return Receipt Postcard |
| <div>Remarks</div> | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|-------------------------|----------|--------|
| Firm Name | LAHIVE & COCKFIELD, LLP | | |
| Signature | | | |
| Printed name | Christopher J. McKenna | | |
| Date | March 18, 2005 | Reg. No. | 53,302 |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 466146188 US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: March 18, 2005

Signature: (Christopher J. McKenna)



PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
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| | | | |
|---|--|--------------------------|-----------------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005 | | Complete if Known | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Application Number | 10/711583-Conf. #5582 |
| TOTAL AMOUNT OF PAYMENT | | Filing Date | September 27, 2004 |
| (\$) | | First Named Inventor | Michael BURR |
| 1,150.00 | | Examiner Name | Not Yet Assigned |
| | | Art Unit | 2157 |
| | | Attorney Docket No. | CXT-093 |

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

_____ - = _____ x _____ = _____

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

_____ - = _____ x _____ = _____

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| _____ | _____ | _____ / 50 (round up to a whole number) x _____ | _____ | _____ |

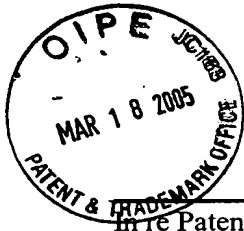
4. OTHER FEE(S)

| | Fees Paid (\$) |
|--|----------------|
| Non-English Specification, \$130 fee (no small entity discount) | |
| Other (e.g., late filing surcharge): 1051 Surcharge-Late oath or declaration | 130.00 |
| 1253 Extension for response within third month | 1,020.00 |

| | | | |
|---------------------|-------------------------------|-----------------------------------|----------------|
| SUBMITTED BY | | | |
| Signature | <u>Christopher J. McKenna</u> | Registration No. (Attorney/Agent) | 53,302 |
| Name (Print/Type) | Christopher J. McKenna | Telephone | (617) 227-7400 |
| | | Date | March 18, 2005 |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 466146188 US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: March 18, 2005 Signature Christopher J. McKenna (Christopher J. McKenna)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Michael Burr *et al.*

Application No.: 10/711583

Filed: September 27, 2004

For: SYSTEM AND METHOD FOR MANAGING
VIRTUAL IP ADDRESSES

Attorney Docket No.: CXT-093

Confirmation No.: 5582

Art Unit: 2157

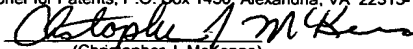
Examiner: Not Yet Assigned

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Commissioner for Patents
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Alexandria, VA 22313-1450

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Dated: March 18, 2005

Signature:


(Christopher J. McKenna)

**RESPONSE TO NOTICE TO FILE MISSING
PARTS OF NONPROVISIONAL APPLICATION**

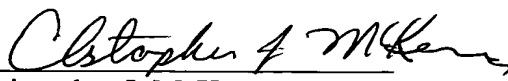
Dear Sir:

In response to the Notice to File Missing Parts of Application – Filing Date Granted mailed October 20, 2004, Applicant respectfully submits a Combined Declaration and Power of Attorney, a Petition for Extension of Time, and Part 2 Copy of Notice.

Please charge our Deposit Account No. 12-0080 in the amount of \$1,150.00 covering the fees set forth in 37 CFR 1.16(f) and 1.17(a)(3). The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 12-0080, under Order No. CXT-093. A duplicate copy of this paper is enclosed.

Dated: March 18, 2005

Respectfully submitted,

By 
Christopher J. McKenna
Registration No.: 53,302
LAHIVE & COCKFIELD, LLP
28 State Street
Boston, Massachusetts 02109
(617) 227-7400
(617) 742-4214 (Fax)
Attorney/Agent For Applicant